

I, Natalie Brown, am the Licensed Nursing Home Administrator at Southport Center for Nursing and Rehabilitation. Southport is a 120-bed facility with 165 employees. I have been in healthcare/skilled nursing facilities for 20+ years and have a passion for quality of life and quality care. I am writing to testify on the huge staffing deficit that has increased since Covid. Mandating a 4.1 direct care minimum will not work along with an Unfunded bill/legislation. This will create a hardship on skilled nursing facilities due to the national staffing challenges. Stone Academy has recently been closed and limited resources of nursing graduates due to decreased programing. Staffing has always been every skilled nursing priority to ensure residents receive quality of care and quality of life. I have been the industry first hand as a Physical Therapist Assistant and the need to support nursing due to lack of staffing. As I moved up in rank as a Director of Rehabilitation, it was clearly identified that the lack of staffing was not due to hiring but due to the lack of help. Nursing homes has received a hit during covid needing to rely on agencies to ensure the minimum staffing coverage placing nursing home in a huge financial deficit. Most importantly the need to address acuity was lacking. How are we able to increase the staffing mandates without a solution or increased funding or programing.

Example of challenges:

Lack of staffing increasing heavy reliance on agency

Agency staff are not vested and may increase poor practices and decrease morale

Lack of funding for staffing creates poor morale due to cost-of-living increase

Hiring pool is limited even with improving rates offered to become more competitive

Loosing staff to agencies due to the high rates, nursing homes cannot afford

Efforts

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The efforts taken to fill open positions consist of utilizing a multifaceted portal that interface with other hiring portal to increase hiring power. Contacted schools and place ads in grocery stores. Creative unsustainable incentive to hire sign on bonus. It has been our number one priority to ensure staffing for all departments to enhance continuity of care. The inability to find staff has created hardships and burnout among our staff.



The unfunded mandate will cause more hardship for residents and staff which will create workers that are not passionate about the work, may cause in increase of abuse hiring people to meet the numbers, and increase the risk of noncompliance due to the impossibility of meeting the standards of the mandate. We lack the resources to fund new staffing even if they are available to hire now. More investigation efforts should be placed in the long-term care workforce which will continue but an unfunded staffing mandate does not provide a solution. Please rethink this mandate due to the long lasting affects it will cause on resident care and due to the limited resources, that is already factor in. Thank you.

Sincerely,

Natalie Brown, LNHA

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